0510497 23CT1912 SB 118

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias | 1 | Juvenile | N

ADMINISTRATION

OBTS Number			
Agency ORI Number: FL0500300	Agency Name: BOYNTON BEACH POLICE DEPT.	Agency Report Number: 34-23-001412	

Charge Type: Check as many as Apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized Enter Type | Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
4269 HYPOLUXO RD, BOYNTON BEACH FL 33436	3800 HYPOLUXO RD, BOYNTON BEACH FL 33436

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/31/2023	0851					

DEFENDANT

Name (Last, First, Middle): BENNETT, JODI, MICHELLE — Alias (Name, DOB, Soc. Sec. #, Etc)

W - White I - American Indian B - Black O - Oriental / Asian	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
	W	F	06/09/1971	504	120	BROWN	BLONDE	FAIR	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): NONE — Marital Status: DIVORCED — Religion: UNK — Indication of: Y N Unk. Alcohol Influence ☐ ☐ ☒ Drug Influence ☐ ☐ ☒

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
1070 AUDACE AVE APT 313	BOYNTON BEACH	FL	33436	(484)575-6274	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
SAME AS LOCAL				( ) -	VERBAL

Business Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Occupation
				( ) -	TEACHER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
B530433717090	[redacted]		REDDING PA	YES

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other — Name (Last) (First) (Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name) — Date — Time — Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated

Released To: (Name) — Relationship — Date — Time

The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any change of address. ☐ Yes, By: (Name) ☐ No (Reason) — School Attended — Grade

Property Crime? Yes ☐ No ☐ — Description of Property — Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbituate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Denv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI	1	☐Yes ☒No	316.193 (1)(A)	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
			23-001412		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☒No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month 02 Day 27 Year 2023 Time 0830 ☒ A.M. ☐ P.M.

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

X _____ Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

ADMIN.

HOLD for other Agency Name:	Signature of Arresting Officer	Name Verification (Printed by Arrestee) (PRINT)
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other.	Name of Arresting Officer (Print): OFC RINI I.D. #: 878	BU#
Intake Deputy I.D. #: 8241	Pouch #:	Transporting Officer: OFC RINI I.D. #: Agency: BBPD

Witness/Face Assistance Signed with Arrestee — SCANNED

Page 1 OF 1

FEB 01 2023

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 31 **DAY OF** January **2023 AT** 0731 ☒ **A.M** ☐ **P.M.**

CASE #: 23-001412 **DEFENDANT:** BENNETT, JODI, MICHELLE

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

I responded to the area of Hypoluxo Rd and N Congress Ave in reference to a possible impaired driver operating a burgundy Ford Mustang bearing Fl tag RPD405 that was involved in a traffic crash and Miner Rd and N Congress Ave and proceeded northbound. The caller advised the vehicle was leaving the scene and was last observed northbound on N Congress Ave. I observed the vehicle stopped at the red light at N Congress Ave and Hypoluxo Rd parked between two lanes of travel, which appeared she was attempting to make a left turn to proceed west on Hypoluxo Rd. I proceeded to make a U-turn at which point the vehicle proceeded to travel westbound as I no longer observed the vehicle at the light. I proceeded westbound and observed the vehicle traveling with the hazard lights on in the 3400 block of Hypoluxo Rd at a very slow speed. The vehicle proceeded westbound failing to maintain a lane traveling from the center to the right lane as the vehicle was now approaching Lawrence Rd and got stopped at the red light. While stopped at the light, I could see the driver of the vehicle was a white female who appeared to be nodding her head up and down. As the light turned green, the vehicle proceeded to travel westbound failing to maintain a single lane swerving to the right. The vehicle then proceeded to drive on the right shoulder of the roadway over the edge markings and then struck the raised curb, riding the curb until the driver turned the wheel and entered back into the right lanes of travel. I conducted a traffic stop based on the driving pattern activating my lights and sirens. The vehicle proceeded to slow down at which time the drive pulled off the roadway and struck a FPL pole near the sidewalk at a low speed (3 mph). I made contact with the driver, sole occupant, later identified as W/F Bennett, Jodi, Michelle DOB 006/09/71. Upon asking Bennett for her License, registration and insurance card, Bennett was very lethargic and had very slow movements. Bennett had a heavy slurred/thick speech and glassy eyes. Bennett provided her Fl driver's license, insurance card and then it took her a few minutes to locate her registration card. I asked Bennett about striking the pole and she advised she was pulling over. Let it be noted that this occurred within the City of Boynton Beach, Palm Beach County Florida. PBSO community Service Aid Portman conducted the crash report reference the pole (PBSO case # 23-031410).

Once Portman was done with her crash investigation, I advised Bennett I was now conducting a criminal investigation based on the fact I believed she was operating her vehicle while impaired. I asked Bennett to exit her vehicle as Bennett exited, she was unstable on her

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feet. I read Bennett her Miranda Rights from a department issued card which was captured on my BWC. Bennett advised she understood.

Based on my observations of the driving pattern, the crash, and my observations to this point, I requested Bennett to submit to a series of Field Sobriety Tasks to determine if she was operating a motor vehicle while under the influence of an alcoholic beverage, or narcotics. Bennett advised she was not drunk or on any medications and did not know why I was requesting her to submit to the tasks. I advised Bennett her Taylor warnings and she advised she would conduct the tasks.

HORIZONTAL GAZE NYSTAGMUS:

- ☒ Left eye does not follow smoothly
- ☒ Left eye prior to 45 degrees
- ☒ Distinct jerking in left eye at maximum deviation
- ☒ Vertical Nystagmus in left eye
- ☒ Right eye does not follow smoothly
- ☒ Right eye prior to 45 degrees
- ☒ Distinct jerking in right eye at maximum deviation
- ☒ Vertical Nystagmus in right eye

WALK AND TURN:

This exercise was explained and I attempted to demonstrated it to Bennett. Bennett advised she understood. I got as far as explaining the Bennett to put her right foot on the line and her left foot in front of the her right foot. Bennett advised she was unable to complete the task.

ONE LEG STAND:

This exercise was explained and demonstrated to Bennett. Bennett advised she understood. Bennett swayed while balancing while standing with her feet together. As Bennett proceeded to attempt to raise her right foot, she was unable to. Bennett then attempted to raise her left foot and was unbale to. Bennett stood there with her foot on the ground for the 30 seconds.

FINGER TO NOSE:

This exercise was explained to Bennett. Bennett advised she understood. Bennett began and did not touch the tip of her nose on all attempts, Bennett touched below the tip of her nose. On the third right, she proceeded to raise her left finger, then caught herself and raised the right.

ROMBERG/ALPHABET:

This exercise was explained to Bennett. Bennett advised she understood. Once the task started, Bennett proceeded to lower her head while reciting the alphabet.

Based on the above facts I've established probable cause for the arrest of Bennett, Jodi with the charge of Driving Under the Influence

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pursuant with F.S.S. 316.193(1)(a). Bennett was placed into cuffs and transported to PBSO for further processing.

Upon arrival at the PBSO BAT (0934 hours), a 20 minute observation was conducted on Bennett. During this time, Bennett did not consume any liquid or items into her mouth. After the 20-minute observation, I requested Bennett to submit to a lawful test of her breath for the purpose of determining its alcohol content. Bennett provided two breath samples, .008 and .009. I then read Bennett Implied Consent and asked her to provide a sample of her Urine to determine the presence of a chemical or controlled substance. Bennett stated "Don't you need a warrant for that". I advised Bennett no and she advised she would provide Urine. I then read Bennett her Miranda Warnings which she stated she undersood. I asked Bennett if she would answer question and she advised no. Bennett was then escorted to the booking cell at which time I removed the handcuffs from Bennett. Bennett provided a sample of her urine to Breath Tech O'neal. Bennett was TOT to Palm Beach County Jail. The Urine was submitted to BBPD evidence for further processing.

The following instrument was sworn to before me this 31 day of January 2023

By: Ofc RINI #878

S. O'Neal

Notary/Police Officer (F.S.S. 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

Ofc RINI #878

Signature of Arresting Officer

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FEB 01 2023

WITNESS LIST

CASE NUMBER: _____

ARRESTING OFFICER: **OFC RINI #878**

ADDRESS: **2100 HIGH RIDGE RD BOYNTON BEACH FL 33436**

PHONE NUMBERS (HOME): _____ (WORK) **561742 6853**

CAN TESTIFY TO: **ARREST, FACTS IN REPORT**

NAME: **OFC MASTRO**

ADDRESS: **2100 HIGH RIDGE RD BOYNTON BEACH FL 33436**

PHONE NUMBERS (HOME) _____ (WORK) **561 742 6100**

CAN TESTIFY TO: **FACTS LISTED IN REPORT**

NAME: **OFC DUBE**

ADDRESS **2100 HIGH RIDGE RD BOYNTON BEACH FL 33436**

PHONE NUMBERS (HOME) _____ (WORK) **561 742-6100**

CAN TESTIFY TO: **FACTS LISTED IN REPORT**

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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FEB 01 2023

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 23-031443 PBSO ZONE 6-11

AGENCY CASE # 23-001412 CRASH CASE #

TIME OF STOP/CRASH 0743 HOURS DATE 04/15/2021 DAY

SUBJECT'S NAME BENNETT (LAST) JODI (FIRST) MICHELLE (MID) RACE WHITE SEX FEMALE

HGT 504 WGT 120 DOB 06/09/71

LOCATION 4269 HYPOLUXO RD, BOYNTON BEACH, FL, 33436

ARRESTING OFFICER'S NAME & ID OFC RINI 878 AGENCY BOYNTON BEACH PD

DIVISION: TRAFFIC Lawrence

NOTIFIED BY COMMO ✓

ARRIVAL AT FACILITY 0934 HOURS

ARREST TIME 0851 HOURS

BREATH RESULTS:

1). 008
2). 009
3) Urine Pending
4)

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # 1

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FEB 01 2023

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 01/31/2023

Date of Last Agency Inspection: 01/13/2023
Observation Period Began: 09:34
Subject's Name: JODI M BENNETT DOB: 06/09/1971 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	10:18
Air Blank	0.000	10:18
Control Test	0.080	10:19
Air Blank	0.000	10:19
Subject Sample #1	0.008	10:20
Air Blank	0.000	10:21
Air Blank	0.000	10:23
Subject Sample #2	0.009	10:24
Air Blank	0.000	10:24
Control Test	0.080	10:25
Air Blank	0.000	10:25
Diagnostics Check	OK	10:25

Cylinder Lot: 08622080A1
Exp: 06/05/2024

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (__) is personally known to me or (✓) produced ID as identification, and who after being placed under oath, states:

I SHARI L O'NEAL, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: S. O'Neal Date: 01-31-23
Signature

Sworn to (or affirmed) before me this 31 day of January 2023

Ofc [illegible] Ofc. Rini #878
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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FEB 01 2023

TESTING FACILITY TASK REPORT

AGENCY: BBPD OFC. RINI #878

SUBJECT: BENNETT, JODI M.

CASE NUMBER: 23-031443

DATE: 01-31-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 10:15 HRS

ENDING TIME: 10:30 HRS

BREATH TESTS RESULTS: 1) .008 TIME 05:11 A.M.☒ P.M.☐ 2) .163 TIME 05:15 A.M.☒ P.M.☐

3) TIME A.M.☐ P.M.☐ 4) TIME A.M.☐ P.M.☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLUR

ATTITUDE: CALM,COOPERATIVE

CLOTHING: SWEATER- TAN SHIRT- WHITE PANTS- PINK

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES:VERY GLASSY,
DEXTERITY: A LITTLE UNSTEADY

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O RINI #878
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE BREATH REQUEST.
D COMPLETED THE TEST CORRECTLY.
EXPLAINED THE BREATH RESULTS TO THE D.
A/O REQUESTED A URINE SAMPLE ON CAMERA.
D SUBMITTED TO THE URINE SAMPLE.
A/O READ THE C/W ON CAMERA TO THE D, D REFUSED THE Q&A.
D GAVE A URINE SAMPLE.

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SUBJECT: Bennett, Jack, [illegible] CASE NUMBER: [illegible]14/2

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

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WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SUBJECT: Bennett, Jody, Michelle CASE NUMBER: [redacted]

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your ***BREATH*** for the purpose of determining its alcohol content.

OR

I am now requesting that you submit to a lawful test of your ***URINE*** for the purpose of determining the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your ***breath, urine*** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS SIGNATURE: (X)_____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X)_____

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WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

PALM BEACH COUNTY
SHERIFF'S OFFICE

Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023002956	**Date:** 2/1/2023
	Specialist Name/ID: Chantel Daniels/30347

SCANNED
FEB 01 2023